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# Risk factors of Marital Violence of Married Men and Women in Different Levels of Severity

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## Abstract

The aim of the present study was exploring and comparing most important risk factors of marital violence perpetration in different levels of severity. An analytic and comparative design with 306 married men and women as sample of the study (156 men and 150 women) who had been lived with each other for at least 6 months was conducted. They were selected from courts and entertainment centers in oriented sampling way. Data was collected through Personal and Relationship Profile, Dyadic Adjust Scale, Conflict Tactics Scale-revised, Demographic Inventory. Results showed significant differences between risk factors of severe and minor marital violence. Anger management and Dominance were most important predictors of minor marital violence and Negative Attribution, Criminal History, Anger management and Age were most important predictors of severe marital violence. There was no significant difference between men and women perpetrators of severe marital violence. The findings of this study indicated differences between risk factors of minor and severe violence. Furthermore, individual risk factors had more important role in perpetration of severe marital violence but relationship-contextual risk factors did not have more important role in perpetration of minor marital violence and men did not perpetrate severe marital violence more than women.

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Keywords: marital violence, risk factor, severity of violence;

## 1. Introduction

A report done by the world health organization (WHO) on violence and health defines violence as “the intentional use of force or power threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, mal-development or deprivation (WHO, 2002, P.5). Marital violence is a serious problem around the world considering the fact that this kind of violence has mostly been experienced by women. However Swan and Snow (2002) interviewed women and asked them about their and their partners’ aggression. They identified 3 types of relationships: women as victims (34%), women as aggressors (12%), and mixed relationships (50 %). Thus violence was mutual in majority of cases. Furthermore even when the violence is bidirectional, there exists gender

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differences in physical effects of violence, significantly more women (3%) than men (0.4 %) in need of medical attention as a result of their injuries have been found (Tolan et al 2006; Straus and Gelles 1990). Male to female partner violence is more likely to result in injury and death (Stets & Straus 1995). Therefore it sounds men perpetrate severe violence more than women. Researches indicate that psychological sequels in victims such as: high level of depression, suicidal ideation, suicide attempts (Cascardi et al, 1992) disturbed eating and sleeping pattern and nightmares (Goodman, Koss and Russo; 1993) intrusive memories, anxiety and anger, drug abuse (Brown, 1993; Arias, et al, 1997; Diaz-Olavarrieta; 2002).

Johnson (1995, 2000) presented two forms of violence within families: more severe violence known as patriarchal terrorism or intimate terrorism (mostly found in clinical and shelter samples) and low level violence known as common couple violence (mostly found in community samples). Battering or intimate terrorism occurs in context of an overall pattern of power and control by one partner (mostly by men) to dominate, terrorize and control another partner through more severe violence due to the perpetrator's individual pathology. In contrast common couple violence is a type of aggression which occurs at relatively equal rate by men and women. This kind of violence is characterized by infrequent and minor acts of aggression: common couple violence has been labeled as situational violence that gets out of control, with rare instances of injury without an overall pattern of power and control. Therefore, as Johnson & Ferraro (2000) presented, motivations behind these two violence are significantly different and more severe violence is one sided rather than mutual. Since violence in severe types is the result of individual pathology and minor type results from interpersonal context and inability to manage conflict, thus the risk factors of them could be different. Many of studies have investigated the risk factor of marital violence but inquiry of risk factor in different level of severity has been less considered. Therefore the purpose of this study is exploring both individual and interpersonal risk factors of perpetration between both severe and less severe perpetrators among married men and women. We hypothesize that risk factor of perpetration between more severe level and minor level of marital violence is different. We hypothesize that more severe violence is predicted by interpersonal contextual rather than individual factors and minor violence is predicted by individual factors more than contextual - interpersonal risk factors. Also severe level of perpetration in men is higher than women.

## **2. Methods**

### *2.1. Participants*

In analytic and comparative design 306 married men and women who had been lived in Tehran with their partner for at least 6 month and were supposed to be between the age of 15 to 55, by oriented sampling were selected as the sample of this study. In order to have more severe and minor perpetrators in our sample, it was conducted in a community sample (entertainment centers) and family courts. It should be taken into consideration that the courts and entertainment centers were located in 2 different socio-economical neighborhoods. The sample included 68 men and 82 women who were in entertainment centers and 82 men and 74 women who were present in family courts. Thus our sample included 150 community sample participants and 156 court participants. According to whether they confirmed severe or just minor items of CTS-2 scale or not, This 306 participants were divided to two groups (more severe perpetrators and minor ones). At last based on their answers 99 participants were arranged in minor group and 207 participants in a more severe one, even they just confirmed one item of severe violence items, and they were arranged in severe group.

### *2.2. Procedure*

All participants orally consented after they were informed briefly about the goal of research and principle of confidence then they filled four self – report – questionnaires completely. Data was collected through demographic inventory made by author, dyadic adjustment scale, Personal and relationship profile and conflict tactic scale-

revised. Some of participants completed questionnaires in courts or in entertainment centers but the others were not able to complete, therefore the researcher asked for their telephone numbers in order to set an appointment for giving the questionnaires back. 150 of 200 questionnaires which were distributed in the court were filled completely and were given back and 150 of 180 entertainment questionnaires were filled too. The other ones were excluded from the research because of incomplete questionnaires or because participants gave up filling in test situation or changed their mind about giving back the questionnaires the next week. The persons who filled the questionnaires completely, were gifted a book with the title of “Why Marriages Succeed or Fail”.

### 2.3. Measures

*Conflict Tactics Scaled-Revised (CTS-2)* (Straus et al., 1996): The CTS is the most widely used instrument for obtaining data on partner violence. It is the only instrument designed to differentiate between Minor and severe aggression among partners, thus it is appropriate for our purpose. This scale includes 78 items and 5 subscales: Negotiation, Psychological aggression, physical assault, Sexual coercion, Injury. Respondents were asked to indicate the times of violent behaviors occurrence that they may have perpetrated against their partner, or that their partners may have perpetrated against them, during the last year. It means that it includes perpetration and victimization items. In this study, just perpetration items of four subscales (Psychological aggression, physical assault, Sexual coercion, Injury) were used. The respondents were asked to choose one of the 7 points (1-7) in each item. These points indicate the annual frequency of occurrence of each special aggressive act that per item points to. Respondent's score of CTS-2 scale was accounted by sum of the midpoints of selected points. The midpoint of 1<sup>st</sup> point is 1, and the 2<sup>nd</sup> point is 2. The midpoint of 3<sup>rd</sup> point (3 to 5 times) is 4, the midpoint of 4<sup>th</sup> point (6 to 10 times) is 8, and for 5<sup>th</sup> point (11 to 20 times) is 15, and for 6<sup>th</sup> point (more than 20 times) is 20. The midpoint for the 7<sup>th</sup> point (had never occurred during last year) is considered as 0. Straus et al (1996) reported that the reliability of CTS2 ranges from 0.79 to 0.95. All the scales had a good internal consistency: Negotiation (alpha=0.86), Psychological aggression (alpha=0.79), Physical assault (alpha=0.86), Sexual Coercion (alpha=0.87) and Injury (alpha=0.95), (Straus, et al, 1996). Straus has reported evidence of validity for CTS2 (Straus, 2004). The correlations of 0.77 and 0.75 between assault and injury was, as expected, lower than the zero order correlation, and is a good evidence for construct validity.

*Personal and Relationship Profile (PRP)*: This profile includes 187 items and 23 scales. It was designed for studying and screening risk factors of family violence and spousal abuse. PRP is appropriate for both individual (e.g. depression, neglect and criminal history etc) and relational characteristics (e.g. conflict relation etc). The 23 risk factor scales were selected on the basis of review of research on the correlates of couple violence and theories concerning the etiology of couple violence, with attention to including scales that measure variables to test psychological theories and sociological theories of partner violence. Each item assesses a trait or characteristic. Although some scores should be given reversely, the items are scored 1 (strongly disagree), 2 (disagree), 3 (agree), and 4 (strongly agree). The 23 scales of PRP include: anger management (AM), relationship commitment (RC), relationship distress (RD), negative attribution (NA), conflict (CON), jealousy (JEL), dominance (DOM) as relational scales, and antisocial personality symptoms (ASP), borderline personality symptoms (BOR), criminal history (CH), depression symptoms (DEP), gender hostility to men (GHM), gender hostility to women (GHW), neglect history (NH), post-traumatic stress (PTS), self-control (SC), social integration (SI), stressful conditions (STR), substance abuse (SUB), sexual abuse history (SAH), violence approval (VA) and violence socialization (VS) as individual characteristic scales. All the PRP substantive scales have at least a minimally adequate level of internal consistency reliability (0.60-0.69) and most have good (0.70-0.79), or high (0.80-0.87) reliability, with the mean reliability being 0.75 (Straus, Mouradian, 1999). construct is suggested by comparison of the mean score of male students with male violence domestic offenders found significantly higher scores at the 0.05 level for the offenders on 92% of the substantive scales available for male students suggest that, after adjusting the scores for social desirability response bias, the PRP is valid for use domestic violence offenders (Straus, Mouradian, 1999).

**Dyadic adjust scales:** This self-report scale indicates mind impression about degree of marital adjustment and subjective satisfaction. It was made in 1976 by Spanier for assessing the degree of dyadic adjustment. We use short form of DAS which includes 32 items and the range of the scores is between 0 – 151. The DAS has been shown to have high validity and reliability, with a total scale coefficient alpha of 0.96 (Spanier, 1976). The measure has high validity and reliability (Spanier & Thompson, 1982).

**Demographic Inventory:** Age, spouse's age, years of education, spouse's years of education, length of marital life, number of children, income and spouse's income as parametric demographical factors and court-none court, gender, current marital status, residential situation as categorical demographic factors (see the categories in table 1) were considered to show the role of each one in perpetration of violence.

### 3.Result

The mean age of participants was 34.52 (SD, 9.05; range 20-55). The mean of years of education was 13.37 (SD, 2.9). As is shown in table2 the severe perpetrators' mean of age, spouse's age, years of education, spouse's years of education, income, length of marital life, number of children, was less than minor perpetrators and all of participants, but severe perpetrators' means of income of their spouse was more than severe ones. Also as shown in table 1, 67% of severe perpetrators were the persons who completed the questionnaires in courts and 33% of them completed the questionnaires in entertainment centers.

The first research hypothesis that risk factors are different between two groups of perpetrators was tested by  $\chi^2$  test for categorical risk factors variables and by MANOVA for other demographical and psychological variables. As is shown in table 1 there was significant difference in terms of court-none court, spouse's job, current marital status, residential status between the two groups, whereas there was no significant difference between the 2 groups in terms of gender. All risk factors (indicators) were included in a MANOVA to test for different by severity level of violence, Pillai's Trace  $F(34,)=6.7$ ,  $P<0.00$ ,  $\eta^2=0.45$ . Table 2 shows univariate main effects of level of severity of violence occurred for all risk factors (indicators) except age, income of spouse, self-control, history of sexual child abuse, which aren't different between 2 groups. So according to table 1 and 2, as was expected, risk factors generally were different between groups.

**Table 1.** Differences between the 2 groups of perpetrators

Category	Severe violence	Minor violence	Chi-square P-value
<b>Court-none court</b>			0.00
Court	139(67.1)	17(17.2)	
Entertainment center	68(32.9)	82(82.8)	
<b>Gender</b>			0.16
Man	97(46.9)	53(53.5)	
Woman	110(53.1)	46(46.5)	
<b>Current marital status</b>			0.00
Married to each other	68(32.9)	83(83.8)	
Separated	69(33.3)	6(6.1)	
being about to get divorced	60(29)	10(10.1)	
Other	10(4.8)	0(0)	
<b>Residential situation</b>			0.04
Rental	82(39.6)	43(43.4)	
Possessory	99(47.8)	42(42.4)	
House belongs to an organization	9(4.3)	11(11.1)	
Other	17(8.2)	3(3)	

**Table2.** Differences in risk factors by perpetrators groups

INDICATOR	SEVERE(N=207)	Minor(n=99)	F	$\eta^2$
Age	8.54	9.89	5.01*	0.016
Spouse's age	9.11	10.96	0.97	0.003
Education	2.60	3.33	12.16**	0.038
Spouse's education	2.93	3.52	12.28**	0.039
Length of marital life	10.78	10.36	3.61*	0.012
Number of children	1.01	1.33	6.9**	0.022
Income	618382	1154967	5.9**	0.018
Spouse's income	289477	850130	0.49	0.002
AM	3.29	3.12	73.40**	0.195
CP	2.65	2.58	53.22**	0.149
CON	4.46	3.64	109.07**	0.264
DOM	3.75	3.68	92.85**	0.234
GEL	4.66	4.26	3.98**	0.013
NA	2.71	2.16	91.11**	0.231
RC	3.30	2.72	109.24**	0.264
RD	4.34	3.38	127.56**	0.296
ASP	3.21	2.60	9.49**	0.030
BOR	4.35	2.97	99.89**	0.247
CH	3.26	1.95	6.89**	0.022
DEP	4.16	3.09	75.32**	0.199
GHM	2.85	1.97	28.35**	0.085
GHW	2.49	2.18	17.35**	0.054
NH	3.18	3.44	2.76**	0.093
PTS	3.82	3.06	40.81**	0.145
SUB	3.56	2.58	51.63**	0.026
SC	2.29	2.06	8.05	0.005
SI	4.18	3.51	1.41**	0.045
STR	3.48	3.47	14.47**	0.220
SAH	3.01	2.44	85.94	0.012
VA	3.70	3.70	3.62**	0.047
VS	4.12	4.24	14.98**	0.009
DAS	23.81	17.61	121.92**	0.286

0.01&lt;P&lt;0.05 \*

p&lt;0.01 \*\*

We tested our 2nd and 3rd hypothesis by using stepwise method of multiple regression tests to determinate the most important risk factors (predictors) that explain perpetration both of minor and severe violence. In order to decrease the number of too many variables to fit it with the sample size, at first we inquired significant correlations between minor violence perpetration and predictors (risk factors), then none significant predictors were excluded. Finally 9 remained predictors which were: Age, AM, DOM, CP, NA, RD, DEP, PTS, DAS entered to minor violence regression test. So for severe violence regression test, we again excluded CON, GEL, SC, STR, SAH, because they didn't correlate significantly with severe violence perpetrations. As is shown in table 5, anger management and dominance were independent predictors in final model. The adjusted  $r^2$  for the model was 0.40, meaning that 16% of the variance was explained by mentioned variables. Also by negative attribution, criminal history, anger management and age 15% of the variance of severe violence perpetration was explained the adjusted

$r^2$  was 0.39, meaning that increasing NA,CH and decreasing AM and age are significantly correlated with severe violence.

**Table 3.** Results of multiple regression for minor and Severe violence perpetrations as dependent variables

Predictor	Minor Violence		Severe Violence	
	Coefficient	P	Coefficient	P
Negative attribution	-	-	0.211	0.001
Criminal history	-	-	0.148	0.007
Anger management	-0.264	0	-0.145	0.02
Dominance	0.202	0.001	-	-
Age	-	-	-0.106	0.049

**Table 4.** Differences in severe violence by Gender groups

Variable	Woman(156)	Man(150)	T	P
Overall severe violence	14.88(31.42)	23.30(12.49)	-1.77	0.058
Severe physical violence & Injury	7.85(81.27)	5.88(19.08)	-0.72	1.77

The last hypothesis is that men perpetrate severe violence more than women. Independent t-test was used to compare means of perpetration to all type of severe violence between men and women but unexpectedly there was no significant difference between men and women perpetrators of severe violence. Again also by independent t-test we compared means of perpetration of injury and severe physical violence acts between men and women, the result again showed no significant difference.

#### 4. Discussion

In the present study broad spectrum of marital violence risk factors included demographic, individual and relational psychological variables were studied. Comparing the differences of risk factors between severe and minor violence perpetrators was the main purpose of this study. To compare the differences of the quality of risk factors between different severity levels is an issue that has been less considered in the previous researches. In this paper according to Johnson's theory, it was hypothesized that men perpetrate severe violence more than women, also individual pathology and characteristic had more important role in perpetration of severe violence and relational characteristic had more important role in perpetration of minor marital violence. Moreover the majority of researches in feminism perspective are gender oriented, so they suppose violence against women, thus they study just men as the perpetrators or women as the victims and miss the interpersonal interactions. In contrast, family conflict perspective focuses on context and interaction of couples which decreases the responsibility of the perpetrators. Thus in the present study considering the different aspects such as severity (sever/minor), gender (men/women) and type of risk factors (individual/interpersonal/demographic), we have compared the differences between risk factors and determined their predictive role in explanation of the violence.

The results which are based on comparing the differences of the risk factors between two levels of severity analyzed by multivariate variance analysis indicate that like Johnson, 1995; there were significant differences in risk factors between the two levels. She believed that motivations and individual pathologies and factors which result in

severe and minor violence are different, since not only severity, but also quality of these two types of violence is different.

Second finding shows that the most important predictors are: the dominance which is a relational factor and anger management which is an individual factor. These two factors explain the perpetration of minor marital violence. Considering the regression beta squared, this finding is opposed to Johnson, 1995. It sounds that this contrary is due to the small size of the sample (N=99) regarding the minor violence group in comparison with the number of predictors that entered in the equation of multivariate regression. Another reason than can define the disconformities of our results with Johnson can be that according to the findings of Moffit, 2000 perpetrators of minor violence (partner only) rather than those who perpetrate severe violence (general violence) don't have any distinct and discriminated profile. Although in many researches such as Dutton, 1995; Hotaling & Sugarman, 1986; Kantor and Jasinski, 1998; anger management through weak verbal skill, dysfunctional problem solving style and low impulse control has a significant role in increasing the likelihood of perpetration of minor violence.

Dominance factor was predictor of minor marital violence, although Johnson, 1995; believed that severe violence occurs in context of control and dominance, but adversely our finding indicates that dominance predicts minor violence. This may be as a result of the few numbers of minor violence perpetrators in our sample and consequently in our analysis. According to the findings criminal history, anger management and age which are individual factors and negative attribution -which is a relational factor, have an important role in explanation of severe violence perpetration. These findings are similar to Johnson's, 1995. She believed that in severe violence perpetrators individual pathology causes the violence not contextual-relational factors. Gartner, Gollan & Jacobson, 1997; Holthworth-Monroe & Hachinson, 1993; found that through the lack of correct presumption in interpersonal relationship and the attributions that minimizes the responsibility, negative attribution causes violence. Also according to Ehrensoft et al. 2003; criminal history and conduct disorder were mediator variables between child abuse history in family of origin and the marital violence in the future. In the previous studies such as Hotaling and Sugarman, 1986; Kantor, 1998; Pan, Neidig & O'leary, 1994; O'leary, 1999; age was the predictor of marital violence. Pan, et al. 1994; found that while the age increases, severe and moderate violence decrease.

We hypothesize that men perpetrate severe violence more than women, but unexpectedly the finding was against the Johnson, 1995; and Swan & Snow, 2002; and there was no significant differences in perpetration of severe violence between men and women. Probably the reason of this disagreement is the lack of batterer men in our sample or their refusing to participate in the study. Besides, according to impossibility of research in forensic medicine centers by an ordinary person, there was a few number of batterer men in our sample. Furthermore studies have found that male batterers and their partner differ significantly in reports of male perpetration, with women reporting higher rate than men (Barrent, Lee & Thelen, 1997; Dobash, Dobash, Cavanagh & Lewis, 1998), besides that men under report their aggression more than women do (Archer, 1999).

**In conclusion,** Risk factors in severe and minor violence are different. Predictors of severe violence are often individual and it seems that in minor violence, it can't be certainly expressed that the risk factors are relational or individual. Thus, predictors of severe violence especially have distinct profiles. According to the findings, planning of specific treatment programs for minor or severe level of violence should be considered as the clinical implications. Unexpectedly, there was no difference in perpetration of severe violence between men and women, thus it may better that treatment programs mainly be planned based on severity rather than gender; it seems that violence is a human problem not just men. On the other hand it can't surely be explained that this unexpected result is a fact or is due to the sampling limitations or is because of our society of study that belongs to a developing country in which women's status is in transition from low to high that the women have enough power to challenge the authority of men but their status is not high. These doubts might be clear in futures studies.



**Limitation:** This study had some limitations. The cross-sectional and analytic-comparative design nature of data limits the ability to draw casual inferences. But the main limitation of study is about sampling and sample size. Few number of participant rather than number of variable and unequal numbers of two groups (sever/minor) resulted in decreasing result's accuracy. Other limitation was inaccessibility to perpetrator of forensic medicine center who was more likelihood to perpetrate severe violence. Besides, there is a possibility that the severe violence perpetrators refuse to participate in study or give it up incompletely.

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